

CLAIMS ONLY						Application Number 1016061100	Filing Date	
						Applicant(s)		
* May be used for additional claims or amendments								
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1						51		
2						52		
3						53		
4						54		
5						55		
6						56		
7						57		
8						58		
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41						91		
42						92		
43						93		
44						94		
45						95		
46						96		
47						97		
48						98		
49						99		
50						100		
Total Indep	10					Total Indep		
Total Depend	56					Total Depend		
Total Claims	66					Total Claims		